Hospital Turnaround Time Emergency Medical Services



KPI Owner: Mike Tully Process: Unit Availability from Hospital

Baseline, Goal, & Benchmark	Source Summary	Continuous Improvement Summary	
6/1/2013)	CAD Data Goal Source: Dept Mgmt Team	Plan-Do-Check-Act Step 8: Monitor and diagnose Measurement Method: The number of runs in which employees were "down" at hospitals over 30 minutes Why Measure: Increase available units, reduce response time	
Benchmark: TBD		Next Improvement Step: Continue looking at financial savings and impact on UHUs. Need to create tool to collect pareto data.	
How Are Mo Doing?			

06.02.13-05.31.14	06.02.13-05.31.14
12 Month Goal	12 Month Actual
12,917	18,704
Target Misses	Target Misses

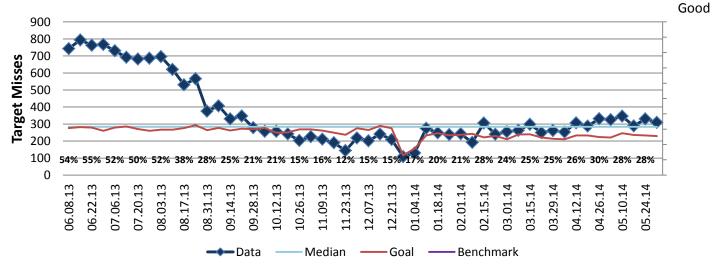


05.25.14-05.31.14	05.25.14-05.31.14
Goal	Actual
230	310
Target Misses	Target Misses



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The seven basic quality tools, "5 Whys" technique, brainstorming and other methods will be applied to the measure graphed above. The purpose of using the tools/methods is to understand what makes performance less than desirable if performance is not best in class.